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### The Social and Spiritual Factors Affecting Chronic Renal Dialysis Patients in Gaza Strip

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#### Background

End-Stage Renal Disease (ESRD) is a progressive worsening of kidney function over a period of months or years. It is a complex debilitating disease that needs a lifelong treatment. Because patients with ESRD cannot be cured of their underlying conditions and mostly underwent hemodialysis program, it usually leads to many physical and medical consequences and complications, and beside them, there are lots of concealed social and spiritual factors that can affect people who have this disease or are on renal dialysis. Some studies about medical and clinical consequences of ESRD and renal dialysis were conducted but this study will be the first one to determine the factors affecting the social and spiritual wellbeing of patients who are on renal dialysis in Gaza Strip.

#### Objectives

It is important to give a detailed picture about the social and spiritual wellbeing of patients who are on renal dialysis to help the medical professionals to recognize the social and spiritual variables, so early intensive intervention can be performed once necessary.

#### Methods

A total of 120 patients who had ESRD and were treated with hemodialysis completed face to face questionnaires. A self-designed questionnaire has been used; the end result is a questionnaire consisted of 6 sections including demographic data, physical, social, psychological and spiritual wellbeing, degree of coping with current condition, uncertainties about health in future, self-esteem and dependency, and the impact on marital relationship.

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## Results

Among 120 participants, 55% were females and the mean age was 48.5 (SD: 16.7).

An eighty one point seven percent were unemployed and 81.7% of the participants were of low educational level. Thirty percent of the patients have family history of hemodialysis; 55.6% of them are first degree relatives and 44.4% for the second and third degree relatives. Seventy two point two of patients have co-morbidities, mostly hypertension (49.4%). Fatigue (93.8%) and insomnia (56.2%) are the two major physical complaints after the process of hemodialysis, however, (53.3%) of the patients felt more comfortable after it.

Seventy seven percent of the patients suffered from a financial impact and 60.3% had weak social relationships. Sixty percent considered that the process of hemodialysis makes their life restless to the extent that makes their daily activities to be negatively affected by 73.8%.

Among 85 married patients, the sexual performance and the sexual desire were negatively affected by 54.2% and 52.2% respectively. Only 50% of the patients stated that they have a goal they want to achieve in their life. Seventy eight percent of the patients were uncertain about their health and 67.3% were worried from about the future. However, 70% of the participants claimed that spiritual devotions and stronger faith has made them more able to accept their disease and deals in a positive manner towards being involved in the hemodialysis program.

## Conclusion

Social and spiritual well-being should be considered as important predictive factors for a better quality of life in hemodialysis patients. Results also suggest that assessing and addressing social and spiritual well-being among hemodialysis patients may help in providing a holistic medical care.